

## STATE OF NEW HAMPSHIRE

#### 2017 Statement of Income and Expenses for LOBBYISTS (RSA Chapter 15)

RECEIVED

APR 1 1 2017

PLEASE PRINT

I. Name of Lobbyist(s) _	Darryl W. Perry	/		NEW HAMPSHIRE DEPARTMENT OF STATE
II. Name of lobbyist's pa	rtnership, firm or corporation	ı, if any:		_
Liberty Lobby LLC				
	partnership, firm or corporation)	.,,,,		THE RESERVE OF THE PERSON OF T
63 Emerald St #369	9	Keene	NH	03431
Business Address: (Street)	(Town/C	ity) (	State)	(Zip Code)
(603) 835 3257	( )	e-mai	darryl@libe	ertylobby xyz
(Telephone)		(Fax)		15/1005/11/12
reportable expense trans	s: (Choose one – file separate actions which are not attribut	able to any one client).		
All reportable transacti	ons occurring in the months pri	or to the reporting date	relative to the foll	owing client:
Liberty Lobby LLC				
	all Name of Client as it appears on	the Lobbyist Registration I	orm)	ra rangina shiqiban raw magina
<u>OR</u>				
unrelated to any particular	ons by the lobbyist (including the client.	ie lobbyist's family), or	the lobbying firm	listed below which are
	pril 26, 2017 X om date of registration to 3/31/17	July 26, 2 activity from 4/1/		
	ctober 25, 2017 ity from 7/1/17 to 9/30/17	January 3 <i>activity from 10/</i>	1, 2018 I/17 to 12/31/17	
	fees received and no report olete just this form and submit it			•
VI. Check if additional re	ports are attached:			
	es or made expenditures, you n	nust file <b>Addendum A</b> -	Fees and Expens	es
•	norarium or reimbursed expensi		-	
X If you, your firm, or yo	our family has made political co	ntributions, you must fi	le Addendum C-	- Political Contributions
Sworn Statement/Affirmal I have read RSA 15, RSA and complete to the best of	15-B, RSA 14-C and RSA 664	·	_	oing information is true
$\gamma \nu \gamma$		4/11/17		<del></del>
(Signature of lobbyist)			(Date)	
Ďarryl W. Perry				
(Print Name of lobbyist)				

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# STATE OF NEW HAMPSHIRE

# Lobbyists Fees and Expenses Addendum A

(RSA Chapter 15:6)

I. Name of Lobbylst(s) Darryl W. Perry	
II. Name of lobbyist's partnership, firm or corporation, if any:	
Liberty Lobby LLC	
(Name of partnership, firm or corporation)	
III. Name of Client Liberty Lobby LLC	Date 4/11/17
<ul> <li>IV. Fees Received</li> <li>Indicate the gross amount of all fees received from the client identified above to lobbying, including fees for services such as public advocacy, government including research, monitoring legislation, and related legal work. The gre reduced by any expenses:</li> <li>a) Total of all fees received in this reporting period</li> <li>b) Total of all fees received this calendar year, prior to this reporting period (This should equal the total of all prior monthly reports for this calendar year)</li> <li>c) Total of all fees received to date (Add lines a and b)</li> <li>d) Indicate the amount of any such fees that are due, but have not yet been paid</li> </ul>	relations, or public relations service oss fee amount reported shall not b  a) \$\$1,097.17  b) \$\$0
V. Expenses: Lobbyist(s)/Lobbying partnerships, firms, or corporations are required to repfees. Separate reports are to be filed for expenditures made relative to each of the lobbyist(s)/firm that are unrelated to any one client a separate report of Expenses are to be reported in one of three categories of expenses: (a) the during the reporting period for salaries, benefits, support staff, and office exindividual expenses where the expenditure was of \$25.00 or less (for example lunch where the cost was \$25.00 or less, purchase of a pen with a value of lebeing lobbied, purchase of a ceremonial object given to a person being lobbie (c) an itemized statement of each individual expenditure made during this repeating purpose not covered by (a) (for example: purchase of a meal with value ceremonial object to be given to the subject of lobbying with a value greate restaurant expenses for a legislative reception). Expenses for honorariums, contributions will be reported on separate addendums and should not be reported.	chent and if expenditures are made by nay be filed for the lobbyist(s)/firm aggregate total of all expenses paid (penses; (b) the aggregate total of a let meals purchased during a business than \$10 that is given to the person with a value of \$25.00 or less); an orting period of greater than \$25.00 for than \$25, but not greater than \$56, expense reimbursement, or political
a) Total aggregate expenses for this reporting period for salaries, benefits, support staff, and office expenses, related directly or indirectly to lobbying.	a) \$\$1,097.17
b) Total aggregate of expenditures during this reporting period, not reported in a), of \$25 or less.	b) \$O
e) Total of all itemized expenditures reported in detail in section VI.	e)\$ 0

d) Total expenses for this reporting period (Add lines a, b and c)	d) \$ \$1,097.17
(Add lines a, b and c)	
e) Total of expenses paid this calendar year, prior to this reporting period (This should be the amount on line f of addendum A for last month's report)	e) \$ \$1,097.17
f) Total of all expenses year to date	f) \$\$1,097.17
VI. Other Expenses:  Provide the following detail for all expenditures of more than \$25 made from loperiod, including by whom paid or to whom charged.	obbying fees during this reporting
Paid to:	Amount:
	\$
	\$
	\$
	\$
	\$
	\$
• • • • • • • • • • • • • • • • • • •	
Sworn Statement/Affirmation by Lobbyist	
I have read RSA 15, RSA 15-B and RSA 664 and hereby swear or affirm is true and complete to the best of my knowledge and belief.	n that the foregoing information
	4/44/47
	4/11/17
(Signature of lobbyist)	(Date)
Darryl W. Perry	
(Print Name of lobbyist)	



## STATE OF NEW HAMPSHIRE

Lobbyists Report of Political Contributions Addendum C (RSA Chapter 15:6)

I. Name of Lobbyist(s)	Darryl W. Pe	rry	
II. Name of lobbyist's pa	artnership, firm or cor	poration, if any:	
Liberty Lobby LLC			
(Name of p.	artnership, firm or corporation)		
III. Name of Client Lit	perty Lobby LLC		Date _4/11/17
Political Contributions For each political contrib client/lobbyist and lobby			ter 664 paid on behalf of the
Full name of candidate:	Libertarian Party (	Of NH (First Name)	(Middle Name/Initial)
Amount of contribution \$ _	\$85	Office Candidate is	s Seeking
enter an estimated value and			ation. If the actual cost is not known
(If more than three contributions) Sworn Statement/Affiri	•	nal contributions on separat	e addendum C forms.)
I have read RSA 15, RSA is true and complete to the			rm that the foregoing information
			4/11/17
(Signature of lobbyist)			(Date)
Darryl W. Perry			
(Print Name of lobbyist)	•		

ntribution. If the actual cost is not known,
eparate addendum C forms.)
r affirm that the foregoing information
artimitiat the foregoing information
4/11/17
(Date)